

DMI St.JOSEPH GLOBAL SCHOOL By Sisters of DMI

Thiruvallur Highway, Polivakkam, Thiruvallur - 602 002. PH : 94459 70138 Website : www.dmisjgspvm.in Email : dftdmipolivakkamsch@dmifoundations.org

APPLICATION FORM - XI

ACADEMIC YEAR 20 - 20

Registration No. (For Office use only)

Affix recent passport size
photo

1	Name of the Pupil (I As Per Class X Admit					
2	Gender:	Male / Female	07			
3	Date of Birth :	a) In Figures				
		b) In Words				
4	or Scheduled Tribe / (for Statistical purpo	elongs to Scheduled Caste / BC / MBC / OBC ose only) icate to be attached.)				
5	Whether living with parent or guardian (if living with guardian - reason)					
6	Annual Income / Off b) Mother's Name Qualification / Occu	pation / Designation / ice Address & Phone No. pation / Designation / ice Address & Phone No. ss & Phone No.	UMAN ALILA ATIONS 984			
7	a) Residential Addre	ignation / Office Address				
8		udying in this institution	Name: Relationship: Class:	Sec:		
			UI233.	560.		

9	Name of the School and Address (Presently studying in Class X)								
10	Level of Maths subject appearing / appeared in Class X Board Exam			Standard Maths / Basic Maths					
11	Group wish to opt Tick any one			S1 - English, Physics, Chemistry, Maths, Computer ScienceS2 - English, Physics, Chemistry, Maths, BiologyC1 - English, Business Studies, Accountancy, Economics, MathsC2 - English, Business Studies, Accountancy, Economics,Computer Science					
12	Marks/ Grades Scored in 10th	Language (Specify)	English	Maths	Science	Social Science	Total	Percentage	
			K	48		0			
I									
 Issue of the Application form or Registration does not guarantee allotment of seat or admission to the class. Self - Attested photocopies to be attached with the application (i) Transfer Certificate, Marks Statement, Conduct Certificate, Community Certificate and Migration Certificate and Birth Certificate (Orginals to be submitted at the time of admission) (ii) Address proof of Father (Aadhar / Ration Card / Voter ID) Latest passport size photograph of the student to be attached. 									
FOR OFFICE USE ONLY									
Application No: Admission No:				Standard: Medium of Instruction: In Group above (Vide No. 19)					
Date	:			Signature of the Principal					